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APPLICANTS

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** CONTINUING DATA *** *NDALP*

** FOREIGN APPLICATIONS *** *NDALP*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged Examiner's Signature <i>Q</i>	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Initials <i>B</i>	STATE OR COUNTRY CA	SHEETS DRAWING 10	TOTAL CLAIMS 50/63	INDEPENDENT CLAIMS 7
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TITLE

X-ray imaging device

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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